

<i>SERFF Tracking Number:</i>	<i>AMRP-126587053</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>World Corp Insurance Company</i>	<i>State Tracking Number:</i>	<i>45447</i>
<i>Company Tracking Number:</i>	<i>09AR0553</i>		
<i>TOI:</i>	<i>MS08I Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS08I.005 Plan F (Basic) 2010</i>
	<i>Standard Plans 2010</i>		
<i>Product Name:</i>	<i>CompletePlus Medicare Supplement Brochure</i>		
<i>Project Name/Number:</i>	<i>CompletePlus Medicare Supplement Brochure/09AR0553</i>		

Filing at a Glance

Company: World Corp Insurance Company		
Product Name: CompletePlus Medicare Supplement Brochure	SERFF Tr Num: AMRP-126587053 State: Arkansas	
TOI: MS08I Individual Medicare Supplement - Standard Plans 2010	SERFF Status: Closed-Filed-Closed	State Tr Num: 45447
Sub-TOI: MS08I.005 Plan F (Basic) 2010	Co Tr Num: 09AR0553	State Status: Filed-Closed
Filing Type: Advertisement	Authors: Susan Falk, Michele Kulish Danielson, Andrea Davey, Kerin Overturf	Reviewer(s): Stephanie Fowler
	Date Submitted: 04/16/2010	Disposition Date: 04/28/2010
Implementation Date Requested: On Approval		Disposition Status: Filed-Closed
State Filing Description:		Implementation Date:

General Information

Project Name: CompletePlus Medicare Supplement Brochure	Status of Filing in Domicile: Authorized
Project Number: 09AR0553	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 04/28/2010	Explanation for Other Group Market Type:
	State Status Changed: 04/28/2010
Deemer Date:	Created By: Kerin Overturf
Submitted By: Kerin Overturf	Corresponding Filing Tracking Number:
Filing Description:	
Re Individual Medicare Supplement	

F4290

We are including the above captioned form for your review and information. The form is new and is not intended to replace any forms that are currently in use. This is a product brochure that will be used in the solicitation of our

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 Standard Plans 2010
 Product Name: CompletePlus Medicare Supplement Brochure
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Individual Medicare Supplement plans.

We hope you will find this form satisfactory. Should you have any questions, or if I can be of assistance during the review process, please feel free to call me at 1-800-247-2190, ext. 2064.

Thank you.

Company and Contact

Filing Contact Information

Kerin Overturf, kerin.overturf@americanenterprise.com
 601 6th Ave 515-245-2064 [Phone]
 Des Moines, IA 50334 515-247-2469 [FAX]

Filing Company Information

World Corp Insurance Company CoCode: 79987 State of Domicile: Nebraska
 11808 Grant Street Group Code: 3527 Company Type: Life and Health
 P O Box 3160 Group Name: American Enterprise State ID Number:
 Omaha, NE 68103-0160 FEIN Number: 56-0710065
 (402) 486-8289 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? Yes
 Fee Explanation: 1 Advertising form @ \$50.00 per form = \$50.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
World Corp Insurance Company	\$50.00	04/16/2010	35726151

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Disposition

Disposition Date: 04/28/2010

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule Form	Schedule Item	Schedule Item Status	Public Access
	CompletePlus Medicare Supplement brochure	Filed-Closed	Yes

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Form Schedule

Lead Form Number: F4290

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 04/28/2010	F4290	Advertising	CompletePlus Medicare Supplement brochure	Initial			F4290.pdf



CompletePlus
Medicare Supplement
Insurance Plans

Underwritten by World Corp Insurance Company
F4290

Comprehensive Protection That Fits Your Needs and Your Budget

You are facing some tough choices about your health care coverage. We're here to help. CompletePlus offers the coverage you seek and the benefits you want at a price you can afford. Maybe the decision isn't so difficult after all...



Affordable Rates

- Preferred Rates for good health and Couples Discount for simply being part of a couple¹
 - Easy to qualify for – and can be combined!
 - Permanent, so even if your situation changes, your savings won't
- Direct online application process means additional savings for you



Freedom to Choose

- Choose your doctors and hospitals – even when you travel
- Select your specialists – no referrals needed



Convenience

- ExpressLane Automatic Claim ServiceSM works with Medicare to make sure your claims are paid quickly and accurately



Security

- Any health conditions you have now are covered immediately once your plan is issued
- Automatically keep all approved discounts for as long as you hold your plan
- Your core benefits will stay the same from year to year
- Your coverage will never be cancelled – regardless of your health condition, as long as you pay your premium on time



Experience and Stability

- CompletePlus Medicare Supplement Plans are underwritten by World Corp Insurance Company, a wholly owned subsidiary of World Insurance Company – a leader in the health care insurance industry
- Founded over 100 years ago, World Insurance Company has served [thousands of] customers, making us highly-skilled in providing quality health care solutions that meet their needs
- World Corp Insurance Company has earned a highly respected [A- (Excellent)] rating by A.M. Best Company², a testament to our financial strength and stability



Plan F

CompletePlus Plan F is designed to protect you from virtually all out-of-pocket doctor and hospital expenses, providing the most comprehensive coverage for your dollar.

Medicare Part A—Hospital Expenses (per benefit period)

Hospital Confinement

Benefit	Medicare Pays	CompletePlus Plan F* Pays	You Pay ³
First 60 days	All but \$[1,100] (Part A deductible)	\$[1,100] deductible	Nothing
Days 61-90	All but \$[275] per day (Part A coinsurance)	\$[275] per day	Nothing
Days 91-150 Lifetime Reserve Days	All but \$[550] per day	\$[550] per day	Nothing
After Lifetime Reserve Days are used:			
• Additional 365 days lifetime	Nothing	All costs	Nothing ⁴
• Beyond the additional 365 days	Nothing	Nothing	All costs

Blood

First 3 pints (blood deductible)	Nothing	Cost of first 3 pints	Nothing
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Skilled Nursing Facility⁵

First 20 days	All approved amounts	Nothing	Nothing
Days 21-100	All but \$[137.50] per day (skilled nursing coinsurance)	\$[137.50] per day	Nothing
Beyond 100 days	Nothing	Nothing	All costs

Hospice Care

Available to the terminally ill who elect to receive these services	All but very limited coinsurance for outpatient drugs and inpatient respite care	Medicare coinsurance	Nothing
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Medicare Part B – Medical Expenses (per calendar year)

Physician Services and Other Medical Expenses In or Out of the Hospital

Benefit	Medicare Pays	CompletePlus Plan F* Pays	You Pay ³
First \$[155] of Medicare-approved expenses each calendar year	Nothing	\$[155] (Part B deductible)	Nothing
Remainder of Medicare-approved amounts	Generally 80% (Part B coinsurance)	Generally 20%	Nothing
Covered charges in excess of Medicare-approved amounts up to any charge limitations established by state or federal law ⁶	Nothing	100%	Nothing

Blood

First 3 pints (blood deductible)	Nothing	First 3 pints	Nothing
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Medicare Parts A and B

Home Health Care Medicare – Approved Services

Benefit	Medicare Pays	CompletePlus Plan F* Pays	You Pay ³
Covered home health care visits and medical supplies	100%	Nothing	Nothing
Durable medical equipment			
• First \$[155] of Medicare-approved amounts (Part B deductible)	Nothing	\$[155] (Part B deductible)	Nothing
• Remainder of Medicare-approved amounts	Generally 80%	Generally 20%	Nothing

Plan F also pays these expenses not covered by Medicare

Foreign Travel

Benefit	Medicare Pays	CompletePlus Plan F* Pays	You Pay ³
Medically necessary emergency hospital and medical care beginning during the first 60 days of each trip outside the USA	Nothing	80% of the cost of emergency care, up to a lifetime Maximum Benefit of \$50,000 (you pay a \$250 annual deductible)	Balance

* Plan F also has a high-deductible option. If you choose the high-deductible option on Medicare Supplement Plan F, you have to pay a deductible of [\$2000 for 2010] before the plan pays anything. This amount can go up each year. High-deductible policies have lower premiums, but if you become sick, you'll have higher out-of-pocket costs.



Completeplus

Why wait? Apply online now
at www.CompletePlus.com.

Plan A

CompletePlus Plan A offers only basic benefits for a lower premium.

Hospital Confinement

Benefit	Medicare Pays	CompletePlus Plan A Pays	You Pay ³
First 60 days	• All but \$[1,100] (Part A deductible)	Nothing	\$[1,100]
Days 61-90	• All but \$[275] per day (Part A coinsurance)	\$[275] per day	Nothing
Days 91-150 Lifetime Reserve Days	• All but \$[550] per day	\$[550] per day	Nothing
After Lifetime Reserve Days are used: • Additional 365 days lifetime • Beyond the additional 365 days	Nothing Nothing	All costs Nothing	Nothing ⁴ All Costs

Blood

First 3 pints	Nothing	Cost of first 3 pints	Nothing
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Hospice Care

You must meet Medicare requirements, including a physician's certification of terminal illness	All but very limited coinsurance for outpatient drugs and inpatient respite care	Medicare coinsurance	Nothing
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Physician Services and Other Medical Expenses In or Out of the Hospital

First \$[155] of Medicare-approved expense each calendar year	Nothing	Nothing	\$[155] (Part B deductible)
Remainder of Medicare-approved amounts	Generally 80% (Part B coinsurance)	Generally 20%	Nothing
Covered charges in excess of Medicare-approved amounts ⁶	Nothing	Nothing	100%





Premiums and Renewability. Your coverage may be renewed for life so long as the policy remains in force and your premiums are paid on time. Your benefits and premiums will vary depending on the plan selected. Your premium could change if you move to a different area. Should a necessary premium change be made, it will only be made on a renewal date and only if it is made on all policies in the same class as determined by us. Premiums will increase because a person is one year older (except in AZ, AR, GA and MO).

Read Your Policy Carefully. This booklet provides a very brief description of the important policy benefits; it is not the insurance contract. Your policy contains all of the provisions with which both you and the Company must comply. It sets forth in detail the rights and obligations of both you and your insurance company. THIS IS A LIMITED POLICY DESIGNED TO COVER ONLY THOSE EXPENSES WHICH MEDICARE APPROVES BUT DOES NOT PAY. You will have a 30-

day free-look period to review your policy. If you decide to send the policy back to us within this period, we will return all premiums.

In Colorado, Kansas, Illinois, Mississippi, Missouri, North Carolina, Oklahoma, Oregon, Pennsylvania and South Dakota, coverage is available to qualified Medicare beneficiaries under age 65.

Colorado law requires carriers to make available a Colorado Health Plan Description Form, which is intended to facilitate comparison of health plans. For Medicare supplement plans, the Outline of Medicare Supplement Coverage form is provided.

This is a solicitation of insurance and an agent may contact you.

Not connected with or endorsed by the United States government or the federal Medicare program.

- 1 A couple is defined as two people living in the same household, regardless of sex, who are recognized as being legally married, married under common law, or having a civil union.
- 2 Our [A- (Excellent)] rating [(April 2010)] is the [fourth] highest of 15 possible ratings given by A.M. Best Company. As an independent non-government company, A.M. Best does not recommend products or services but does provide independent opinions of a company's overall financial strength.
- 3 This is your liability for covered charges. You are responsible for all other non-covered charges.
- 4 When your Medicare Part A hospital benefits are exhausted, the insurer stands in the place of Medicare and will pay whatever amount Medicare would have paid for up to an additional 365 days as provided in the policy's "Core Benefits." During this time, the hospital is prohibited from billing you the balance based on any difference between its billed charges and the amount Medicare would have paid for Medicare-covered items or services.
- 5 Medicare only covers approved skilled nursing care in a Medicare-approved facility. Facility licensing terminology may vary by state and may not use "skilled nursing facility" terminology (i.e. nursing facility in Iowa). CompletePlus Medicare Supplement pays the skilled nursing coinsurance for Medicare-approved stays in facilities certified to provide Medicare skilled care.
- 6 Under federal law, doctors who do not accept assignment can charge up to 115% of the fee schedule amount for nonparticipating physicians. The patient does not have to pay charges that exceed that amount.

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Forms: A3110WC, A3111WC and A3112WC




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Why wait? Apply online now
at www.CompletePlus.com.

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